

Division of Corporations

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F 98000005556**Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850)922-4000

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE**IPI FINANCIAL SERVICES, INC.**

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Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of New York submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: TPI FINANCIAL SERVICES, INC.

2. The mailing address of the corporation is: 120 West 45th Street
New York, NY 10036

3. Date of incorporation/qualification: October 5, 1998 Document number: F98000005556

4. The name and address of the current registered agent and office:

Michele McGarity

1255 Pennsylvania Avenue, Suite 107

Miami Beach, FL 33139

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Carol Braga

10563 Plainview Circle

Boca Raton, FL 33498

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

[Signature]
(Signature of an officer, director or vice chairman of the board)

January 14, 1999

(Date)

Gary A. Blumfeld, Secretary

(Printed or typed name and title)

January 14, 1999

(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]
(Signature of Registered Agent)

January 14, 1999

(Date)

If signing on behalf of an entity:

CAROL I. BRAGA

(Typed or Printed Name)

(Capacity)

BlumbergExcelsior Corp. Services
62 White Street, 2nd Fl.
New York, NY 10013
(800) 221-2972

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